CENTERS FOR DISEASE CONTROL

November 9, 1990 / Vol. 39 / No. 44

MMWR

MORBIDITY AND MORTALITY WEEKLY REPORT

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The Great American Smokeout – November 15, 1990

For each of the last 14 years, the American Cancer Society (ACS) has sponsored the Great American Smokeout to focus attention on tobacco use and encourage smokers to refrain from smoking cigarettes for at least 24 hours. Local activities have included requests by local ACS offices to stores to not sell cigarettes for the day; media coverage of prominent local citizens who have quit smoking; and implementation of a smoke-free day by restaurants and other public places. In 1989, approximately one third of all smokers (nearly 18 million persons) participated in the Smokeout (*1*). Of these, approximately 5.3 million did not smoke at all on the day of the Smokeout, and an estimated 3.9 million refrained from smoking 1–3 days later. More than 85% of persons surveyed by the Gallup Organization after the Smokeout had heard of the event (*1*).

By 1987, almost half of all living Americans who ever smoked had quit. The proportion of persons who quit for at least 1 day in the 12 months preceding national surveys increased from 27.8% in 1978 to 31.5% in 1987 (*2*).

This year, the Smokeout will be held Thursday, November 15. The goal is to ensure that at least one in every five smokers gives up cigarettes for the 24-hour period. Additional information is available from local offices of the ACS; phone numbers of the local offices are available from the national office (telephone [800] ACS-2345).

References

1. Lieberman Research Inc. A study of the impact of the 1989 Great American Smokeout: summary, Gallup Organization. New York: American Cancer Society, 1989.
2. CDC. The health benefits of smoking cessation: a report of the Surgeon General, 1990. Rockville, Maryland: US Department of Health and Human Services, Public Health Service, 1990; DHHS publication no. (CDC)90-8416.

Progress in Chronic Disease Prevention

Cigarette Sales to Minors — Colorado, 1989

In July 1987, the Colorado legislature enacted a law* that prohibits the sale of tobacco to minors (persons <18 years of age) and prohibits minors from purchasing tobacco. In August 1989, The Coalition for a Tobacco-Free Colorado, a consortium of privately and publicly funded health organizations, assessed the effectiveness of the law in preventing minors from purchasing cigarettes in Colorado. This report summarizes the findings from that assessment.

Eleven teams of volunteers, each consisting of a minor (mean age: 14.9 years; range: 9–17 years) and an adult, attempted to purchase cigarettes (but did not actually purchase cigarettes) at randomly selected tobacco sales outlets in suburban Denver and outlying communities. Adult members of the team were chosen from a network of coalition volunteers; minors were recruited by the adults (e.g., from their own families or from families of friends). Although each team was initially assigned 20 sites, including up to four vending machine sites, the final sample included 121 sites (range: 4–22 per team). The survey design was modeled on a 1988 study in Santa Clara County, California; in that study, the minors actually purchased the cigarettes (*1*). Because no cigarettes were purchased in the Colorado study, law enforcement officials were not notified of the study.

At each retail site, the team member who was a minor entered the store alone and asked the vendor for a pack of cigarettes. If the minor was asked for age verification and denied purchase, the attempt was classified as unsuccessful. If a sale was recorded on the cash register or a pack of cigarettes was placed on the counter, the attempt was considered successful (a purchase was not made, however; instead, the minor stated that he/she did not have enough money and left the store). The attempt was also considered successful if the vendor asked the minor his/her age but was prepared to sell the cigarettes regardless of the minor's age.

At each vending machine site, the minor entered the vending area alone and attempted to locate the vending machine sign that is required by state law to warn against cigarette sales to minors. If the minor was able to simulate a purchase (i.e., by inserting four pennies, pressing a selection button, pretending to pick up a pack of cigarettes, and leaving the site), the attempt was considered successful. If the proprietor asked for the minor's age or identification, the attempt was considered unsuccessful.

Of 121 purchase attempts, 97 involved contact with a vendor and 24 involved vending machines. Overall, 64% of attempts were successful, including 55% of the vendor contacts and 100% of the vending machine attempts. The success rate was similar for older (>14 years of age) and younger (≤14 years of age) minors (26/47 [55%] compared with 27/50 [54%], respectively). Although girls were more successful than boys (60% compared with 48%), this difference was not statistically significant ($p>0.05$, chi-square test). Attempts were more successful in pharmacies (8/10 [80%]) and gas stations (11/16 [69%]) than in food stores (10/21 [48%]) and convenience stores (18/39 [46%]); attempts at nonfood outlets were more likely to be successful than attempts at food outlets (68% compared with 46%; $p<0.05$). Purchase attempts

*State of Colorado law CRS 18-13-121 entitled "Concerning Unlawful Distribution of Cigarettes and Tobacco Products."

Cigarette Sales – Continued

were more successful in rural towns than in suburban Denver stores (64% compared with 41%; $p<0.05$). For 17 (71%) of the vending machines, the required warning signs were not posted.

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Editorial Note: In the United States, approximately 80%–90% of smokers begin smoking before age 21 (*2*), and an estimated 3000 teenagers initiate smoking each day (*3*). Based on national estimates and Colorado population data, approximately 80 minors in Colorado must initiate smoking each day to sustain 1986 cigarette sales levels (i.e., to offset the number of smokers lost to cessation or death) (*4*).

In general, most smoking-prevention activities in Colorado and other states have been aimed at reducing demand for tobacco among young persons through educational programs. Activities that restrict the supply of tobacco to minors have been hampered because laws that support such activities often do not have substantive provisions for enforcement (*5*).

Findings from this survey indicated that merchant policies requiring sales clerks to establish customer proof of age to purchase cigarettes have not been implemented universally in Colorado. Moreover, sales clerks did not appear to discriminate in their sales practices between very young adolescents and those closer to legal age. Minors' access to cigarettes may have been less successful at food outlets than at nonfood outlets because most food outlets in Colorado sell beer, and sales clerks at these outlets are accustomed to asking for proof of age. Minors may have been able to purchase cigarettes more readily in outlying communities because the age restriction may not have been as well-publicized in those areas as in the Denver metropolitan area. Many vendors in Colorado may not be familiar with this law and its specific provisions; some may believe that its enforcement is unlikely or that the profits from cigarette sales to minors outweigh possible financial penalties for violating the law.

Options available to state and local jurisdictions that could more effectively restrict access to tobacco by minors include 1) developing a retail tobacco sales licensure system in which licensure fees are used to support enforcement efforts, 2) educating vendors about tobacco sales to minors and about the vendors' responsibility to uphold the law prohibiting such sales, and 3) enacting state laws and local ordinances that prohibit the sale of tobacco through vending machines (*6*).

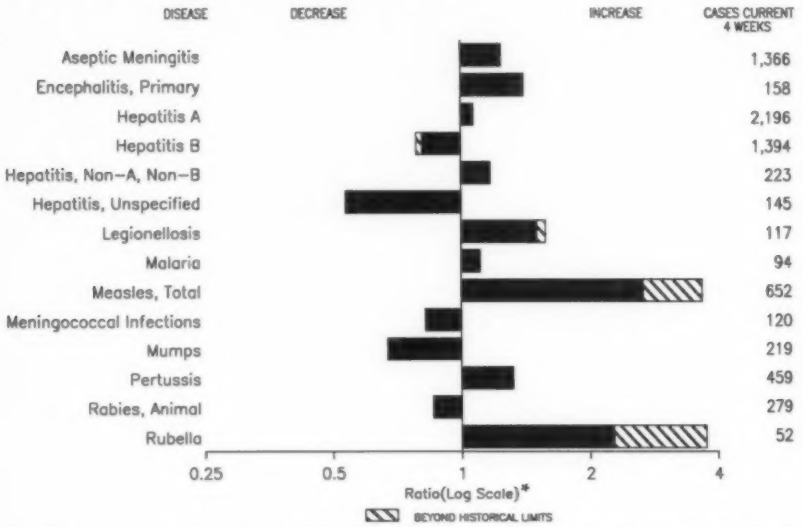
Colorado will use the results from this study to help develop support for an enforcement program to reduce sales of cigarettes to minors, assist tobacco retail groups in increasing their use of warning signs, and help educate tobacco merchants about the need to prevent the illegal purchase of cigarettes by minors.

References

1. Altman DG, Foster V, Rasenick-Douss L, Tye JB. Reducing the illegal sale of cigarettes to minors. JAMA 1989;261:80–3.
2. CDC. Reducing the health consequences of smoking: 25 years of progress—a report of the Surgeon General. Rockville, Maryland: US Department of Health and Human Services, Public Health Service, 1989; DHHS publication no. (CDC)89-8411.
3. Pierce JP, Fiore MC, Novotny TE, Hatziandreu EF, Davis RM. Trends in cigarette smoking in the United States: projections to the year 2000. JAMA 1989;261:61–5.
4. Tye JB, Warner KE, Glantz SA. Tobacco advertising and consumption: evidence of a causal relationship. J Public Health Policy 1987;8:492–508.

(Continued on page 801)

FIGURE I. Notifiable disease reports, comparison of 4-week totals ending November 3, 1990, with historical data — United States



*Ratio of current 4-week total to mean of 15 4-week totals (from comparable, previous, and subsequent 4-week periods for past 5 years).

TABLE I. Summary — cases of specified notifiable diseases, United States, cumulative, week ending November 3, 1990 (44th Week)

	Cum. 1990		Cum. 1990
AIDS	35,868	Plague	2
Anthrax	-	Poliomyelitis, Paralytic*	-
Botulism: Foodborne	17	Psittacosis	96
Infant	54	Rabies, human	1
Other	6	Syphilis: civilian	41,101
Brucellosis	70	military	208
Cholera	3	Syphilis, congenital, age < 1 year	685
Congenital rubella syndrome	3	Tetanus	50
Diphtheria	3	Toxic shock syndrome	254
Encephalitis, post-infectious	1,236	Trichinosis	22
Gonorrhea: civilian	559,926	Tuberculosis	19,580
military	7,384	Tularemia	121
Leprosy	179	Typhoid fever	433
Leptospirosis	47	Typhus fever, tickborne (RMSF)	598
Measles: imported	1,072		
indigenous	23,002		

*Three cases of suspected poliomyelitis have been reported in 1990; five of 13 suspected cases in 1989 were confirmed and all were vaccine-associated.

TABLE II. Cases of specified notifiable diseases, United States, weeks ending November 3, 1990, and November 4, 1989 (44th Week)

Reporting Area	AIDS	Aseptic Meningitis	Encephalitis		Gonorrhea (Civilian)		Hepatitis (Viral), by type				Legionellosis	Leprosy
			Primary	Post-infectious			A	B	NA,NB	Unspecified		
	Cum. 1990	Cum. 1990	Cum. 1990	Cum. 1990	Cum. 1990	Cum. 1989	Cum. 1990	Cum. 1990	Cum. 1990	Cum. 1990	Cum. 1990	Cum. 1990
UNITED STATES	35,868	9,110	882	1,236	559,926	596,630	24,458	17,038	2,121	1,445	1,097	179
NEW ENGLAND	1,235	339	23	-	15,596	17,488	534	910	77	60	61	10
Maine	52	16	3	-	172	233	10	24	4	1	5	-
N.H.	54	35	-	-	142	156	7	39	6	3	4	-
Vt.	14	32	2	-	46	58	5	42	6	-	6	-
Mass.	683	112	11	-	6,633	6,804	349	562	51	54	37	9
R.I.	79	104	1	-	1,005	1,248	49	41	-	2	9	1
Conn.	353	40	6	-	7,600	8,989	114	202	10	-	-	-
MID. ATLANTIC	10,597	866	44	7	73,649	86,220	3,257	2,186	198	86	340	20
Upstate N.Y.	1,294	465	36	1	12,201	14,237	988	596	69	24	129	1
N.Y. City	6,136	132	3	3	29,454	35,149	487	553	25	43	83	14
N.J.	2,131	-	1	-	12,661	13,010	397	524	38	-	48	4
Pa.	1,036	269	4	3	19,333	23,824	1,385	513	66	19	80	1
E.N. CENTRAL	2,511	2,670	2341167	107,415	111,273	1,974	1,978	312	81	281	2	
Ohio	550	510	78	4	33,223	28,994	203	348	74	12	91	-
Ind.	236	294	6	8	9,419	8,354	155	348	18	15	45	-
Ill.	1,052	572	711155	32,898	36,607	959	375	42	17	15	1	
Mich.	482	941	65	-	25,325	28,225	329	544	33	37	87	1
Wis.	191	353	14	-	6,550	9,083	328	363	145	-	43	-
W.N. CENTRAL	876	473	96	2	29,157	28,247	1,493	756	117	31	62	1
Minn.	151	89	59	1	3,542	3,068	213	97	25	1	6	-
Iowa	43	93	5	-	2,020	2,391	248	50	11	4	4	-
Mo.	508	183	7	1	17,773	17,306	420	476	54	20	29	-
N. Dak.	2	19	3	-	76	122	20	5	2	1	1	-
S. Dak.	5	9	4	-	248	238	293	7	4	-	2	-
Nebr.	50	38	7	-	1,569	1,304	94	30	4	-	12	1
Kans.	117	42	11	-	3,929	3,818	205	91	17	5	8	-
S. ATLANTIC	7,711	1,596	246	28	159,166	159,289	2,776	3,339	284	215	154	6
Del.	83	42	5	-	2,738	2,770	99	84	9	2	11	-
Md.	861	233	23	1	19,925	19,014	909	476	49	14	54	3
D.C.	590	9	-	-	11,125	9,204	15	39	4	-	2	-
Va.	602	276	47	1	15,190	13,815	261	210	36	147	13	-
W. Va.	58	51	57	-	1,085	1,227	19	75	4	9	4	-
N.C.	496	176	34	-	23,871	23,944	597	917	107	-	22	1
S.C.	311	21	1	-	12,621	14,525	39	520	15	9	20	-
Ga.	1,092	279	4	1	34,333	30,825	320	409	11	7	19	-
Fla.	3,618	509	75	25	38,278	43,965	517	609	49	27	9	2
E.S. CENTRAL	909	619	56	2	48,337	47,857	335	1,335	186	8	52	-
Ky.	162	166	25	-	4,956	4,667	80	456	54	6	22	-
Tenn.	300	122	23	2	15,169	16,025	157	715	113	-	17	-
Ala.	194	229	8	-	15,998	15,351	97	148	17	1	13	-
Miss.	253	102	-	-	12,214	11,814	1	16	2	1	-	-
W.S. CENTRAL	3,807	728	51	7	61,268	62,067	2,881	1,850	99	273	46	34
Ark.	181	22	5	-	7,355	7,301	470	74	11	23	9	-
La.	608	84	9	-	11,372	13,073	174	273	5	7	13	-
Okla.	170	77	3	6	5,220	5,338	500	143	24	25	15	-
Tex.	2,848	545	34	1	37,321	36,355	1,737	1,360	59	218	9	34
MOUNTAIN	955	356	22	2	11,347	12,487	3,932	1,248	191	115	42	3
Mont.	11	6	-	-	180	161	158	62	7	4	5	-
Idaho	21	7	-	-	124	150	82	72	8	-	3	-
Wyo.	2	7	1	-	131	92	56	15	5	1	2	-
Colo.	310	90	4	-	2,999	2,678	272	153	45	40	8	-
N. Mex.	87	20	1	-	1,050	1,128	818	171	11	10	3	-
Ariz.	274	156	9	-	4,409	5,130	1,760	421	67	43	11	2
Utah	95	27	3	-	326	389	511	89	26	7	3	-
Nev.	155	43	4	2	2,128	2,759	275	265	22	10	7	1
PACIFIC	7,267	1,463	110	21	53,989	71,702	7,276	3,436	657	576	59	103
Wash.	524	-	6	1	4,354	5,850	1,187	510	109	31	12	6
Oreg.	265	-	-	-	2,146	2,621	728	359	49	8	-	-
Calif.	6,325	1,269	96	19	46,181	61,957	5,110	2,448	483	525	45	74
Alaska	24	105	7	-	896	818	181	53	6	5	-	-
Hawaii	129	89	1	1	412	456	70	66	10	7	2	23
Guam	2	2	-	-	194	141	12	3	-	11	-	1
P.R.	1,444	62	6	-	537	945	151	498	9	26	-	6
V.I.	11	-	-	-	357	603	1	11	-	-	-	-
Amer. Samoa	-	1	-	31	63	53	34	-	-	-	-	10
C.N.M.I.	-	-	-	-	156	79	10	9	-	15	-	4

N: Not notifiable U: Unavailable C.N.M.I.: Commonwealth of the Northern Mariana Islands

TABLE II. (Cont'd.) Cases of specified notifiable diseases, United States, weeks ending November 3, 1990, and November 4, 1989 (44th Week)

Reporting Area	Malaria	Measles (Rubeola)					Meningococcal Infections	Mumps		Pertussis			Rubella		
		Indigenous		Imported*		Total									
	Cum. 1990	1990	Cum. 1990	1990	Cum. 1990	Cum. 1989	Cum. 1990	1990	Cum. 1990	1990	Cum. 1990	Cum. 1989	1990	Cum. 1990	Cum. 1989
UNITED STATES	1,014	168	23,002	2	1,072	14,190	2,045	42	4,410	77	3,518	3,213	3	1,050	342
NEW ENGLAND	85	1	265	-	26	337	160	1	41	4	362	332	-	8	6
Maine	2	-	28	-	2	1	14	-	-	-	16	28	-	1	-
N.H.	4	-	-	-	9	15	11	-	10	3	55	16	-	1	4
Vt.	7	-	-	-	1	3	13	-	2	-	7	6	-	-	1
Mass.	46	1	23	-	7	63	73	1	12	-	253	256	-	2	1
R.I.	8	-	27	-	3	41	12	-	5	1	7	11	-	1	-
Conn.	18	-	187	-	4	214	37	-	12	-	24	18	-	3	-
MID. ATLANTIC	222	-	1,287	-	157	990	323	1	295	3	472	264	-	11	36
Upstate N.Y.	44	-	204	-	112	152	120	1	125	1	310	109	-	10	14
N.Y. City	80	-	437	-	21	121	48	-	-	-	-	11	-	-	15
N.J.	73	-	270	-	15	453	68	-	77	-	21	33	-	-	7
Pa.	25	-	376	-	9	264	91	-	93	2	141	111	-	1	-
E.N. CENTRAL	60	-	3,368	-	143	5,016	271	-	464	-	813	463	-	162	28
Ohio	8	-	551	-	3	1,509	83	-	91	-	216	68	-	131	3
Ind.	3	-	417	-	1	78	29	-	20	-	124	19	-	-	-
Ill.	22	-	1,309	-	10	2,736	74	-	164	-	276	158	-	19	21
Mich.	18	U	348	U	125	334	63	U	142	U	76	43	U	9	1
Wis.	9	-	743	-	4	359	22	-	47	-	121	175	-	3	3
W.N. CENTRAL	18	4	888	2	16	748	66	3	145	4	204	206	-	48	6
Minn.	5	4	423	2†	6	23	13	1	15	3	51	57	-	42	-
Iowa	2	-	25	-	1	13	1	1	21	-	18	15	-	4	1
Mo.	10	-	98	-	-	459	28	-	56	1	104	119	-	-	4
N. Dak.	-	-	-	-	-	-	2	-	-	-	2	3	-	1	-
S. Dak.	-	-	15	-	8	-	2	-	-	-	1	2	-	-	-
Nebr.	-	-	97	-	1	113	5	1	7	-	7	6	-	1	-
Kans.	1	-	230	-	-	140	15	-	46	-	21	4	-	-	1
S. ATLANTIC	200	7	921	-	375	711	360	22	1,832	9	293	326	-	20	10
Del.	4	-	8	-	3	40	3	-	6	-	8	1	-	-	-
Md.	56	-	194	-	18	99	42	12	1,039	-	60	67	-	2	2
D.C.	10	1	16	-	7	40	11	2	36	-	14	2	-	1	-
Va.	49	-	84	-	2	22	46	2	101	6	24	33	-	1	-
W. Va.	2	-	6	-	-	53	15	1	44	-	28	32	-	-	-
N.C.	15	-	9	-	15	190	53	-	294	-	71	68	-	-	1
S.C.	3	U	4	U	-	15	24	U	60	U	5	-	U	-	-
Ga.	16	-	99	-	259	17	63	3	89	3	35	44	-	1	-
Fla.	45	6	501	-	71	235	103	2	163	-	48	79	-	15	7
E.S. CENTRAL	20	-	183	-	3	239	122	-	94	2	148	201	-	15	5
Ky.	2	-	41	-	1	44	37	-	-	-	-	1	-	1	-
Tenn.	9	-	93	-	-	145	53	-	52	1	72	116	-	14	4
Ala.	9	-	23	-	2	50	30	-	16	1	68	73	-	-	1
Miss.	-	-	26	-	-	-	2	-	26	-	8	11	-	-	-
W.S. CENTRAL	63	-	4,181	-	94	3,283	144	7	646	1	184	351	-	66	50
Ark.	4	-	18	-	31	22	18	1	138	-	21	29	-	3	-
La.	6	-	10	-	-	81	32	2	109	1	31	19	-	-	5
Okla.	9	-	174	-	-	110	17	1	101	-	52	53	-	1	1
Tex.	44	-	3,979	-	63	3,070	77	3	298	-	80	250	-	62	44
MOUNTAIN	23	9	842	-	100	416	71	4	327	20	288	620	-	109	36
Mont.	1	-	-	-	1	13	11	-	1	-	35	38	-	14	1
Idaho	5	-	16	-	10	7	6	-	143	4	45	72	-	49	32
Wyo.	1	-	-	-	15	-	-	-	2	-	-	-	-	-	2
Colo.	2	-	91	-	47	97	22	-	24	12	102	86	-	4	-
N. Mex.	4	-	81	-	12	31	12	N	N	-	18	32	-	-	-
Ariz.	9	9	300	-	12	145	6	3	129	4	53	371	-	32	-
Utah	-	-	127	-	-	114	7	1	10	-	31	20	-	2	-
Nev.	1	-	227	-	3	9	7	-	18	-	4	1	-	8	1
PACIFIC	323	147	11,067	-	158	2,450	528	4	566	34	754	450	3	611	165
Wash.	25	-	202	-	69	54	66	-	49	2	198	181	-	-	-
Oreg.	13	-	169	-	44	61	58	N	N	3	91	16	-	74	4
Calif.	279	147	10,588	-	39	2,305	388	4	488	15	367	227	2	521	139
Alaska	2	-	78	-	2	1	11	-	4	-	7	1	-	-	-
Hawaii	4	-	30	-	4	32	5	-	25	14	91	25	1	16	22
Guam	3	U	-	U	1	4	-	U	4	U	1	1	U	-	-
P.R.	3	-	1,657	-	-	560	12	-	8	1	12	4	-	-	8
V.I.	-	U	21	U	3	4	-	U	12	U	-	-	U	-	-
Amer. Samoa	35	U	501	U	-	-	-	U	37	U	-	-	U	-	-
C.N.M.I.	-	U	4	U	-	-	-	U	8	U	4	-	U	-	-

*For measles only, imported cases includes both out-of-state and international importations.
N: Not notifiable U: Unavailable †International §Out-of-state

TABLE II. (Cont'd.) Cases of specified notifiable diseases, United States, weeks ending November 3, 1990, and November 4, 1989 (44th Week)

Reporting Area	Syphilis (Civilian) (Primary & Secondary)		Toxic-shock Syndrome	Tuberculosis		Tula-remia	Typhoid Fever	Typhus Fever (Tick-borne) (RMSF)	Rabies, Animal
	Cum. 1990	Cum. 1989	Cum. 1990	Cum. 1990	Cum. 1989	Cum. 1990	Cum. 1990	Cum. 1990	Cum. 1990
UNITED STATES	41,101	37,423	254	19,580	17,920	121	433	588	3,670
NEW ENGLAND	1,437	1,453	22	476	537	3	28	19	6
Maine	7	13	7	18	25	-	-	-	-
N.H.	41	12	1	3	23	-	-	1	3
Vt.	1	1	1	8	8	-	-	-	-
Mass.	586	430	11	243	294	3	27	16	-
R.I.	19	28	1	62	55	-	-	-	-
Conn.	783	969	1	142	132	-	1	2	3
MID. ATLANTIC	7,768	8,008	27	4,703	3,698	1	98	30	881
Upstate N.Y.	777	813	10	323	280	-	18	15	169
N.Y. City	3,610	3,858	5	2,933	2,129	-	54	2	-
N.J.	1,288	1,212	-	809	707	1	22	8	310
Pa.	2,093	2,125	12	638	582	-	4	5	402
E.N. CENTRAL	2,920	1,672	54	1,901	1,821	2	30	45	154
Ohio	468	150	19	335	314	1	6	33	10
Ind.	79	54	1	177	175	1	1	2	14
Ill.	1,242	745	8	963	844	-	14	2	27
Mich.	832	581	26	356	383	-	8	8	48
Wis.	299	142	-	70	105	-	1	-	55
W.N. CENTRAL	439	281	29	520	463	41	5	54	575
Minn.	79	49	5	101	91	-	-	-	215
Iowa	68	30	7	53	44	-	1	2	17
Mo.	233	147	8	267	219	31	3	36	25
N. Dak.	1	3	-	17	13	-	-	-	80
S. Dak.	2	1	-	12	26	4	-	2	191
Nebr.	14	23	3	15	18	3	-	1	4
Kans.	42	28	6	55	52	3	1	13	43
S. ATLANTIC	13,273	13,143	22	3,620	3,751	5	69	257	1,008
Del.	159	185	1	32	38	-	-	1	26
Md.	1,025	697	1	286	329	-	32	17	382
D.C.	979	696	1	135	148	-	-	2	-
Va.	754	495	3	320	305	2	7	22	175
W. Va.	64	15	-	64	63	-	1	1	35
N.C.	1,475	942	10	500	477	2	2	155	8
S.C.	886	728	2	401	423	1	1	39	118
Ga.	3,351	3,224	1	597	597	-	4	18	184
Fla.	4,580	6,161	3	1,285	1,371	-	22	2	80
E.S. CENTRAL	3,868	2,577	14	1,404	1,390	8	4	74	160
Ky.	94	49	3	318	338	2	1	11	45
Tenn.	1,620	1,125	8	417	420	6	1	53	27
Ala.	1,175	779	3	421	392	-	2	10	85
Miss.	979	624	-	248	240	-	-	-	3
W.S. CENTRAL	7,106	5,141	11	2,343	2,179	40	17	95	403
Ark.	443	328	-	288	234	31	-	20	32
La.	2,238	1,283	1	251	292	-	1	2	28
Okla.	215	95	7	175	190	8	2	67	117
Tex.	4,210	3,435	3	1,629	1,463	1	14	6	226
MOUNTAIN	754	577	29	461	437	17	20	13	202
Mont.	-	1	-	22	16	-	-	4	44
Idaho	6	1	2	12	24	-	-	1	7
Wyo.	2	6	2	5	-	5	-	1	47
Colo.	42	60	7	27	41	5	-	2	23
N. Mex.	40	26	3	94	81	4	-	1	12
Ariz.	538	285	9	208	199	-	18	1	34
Utah	17	15	5	37	37	3	-	3	16
Nev.	109	183	1	56	39	-	2	-	19
PACIFIC	3,536	4,571	46	4,152	3,644	4	162	11	281
Wash.	282	392	4	234	200	2	21	2	-
Oreg.	119	207	2	107	119	-	4	1	1
Calif.	3,109	3,956	39	3,606	3,117	-	127	3	258
Alaska	16	5	-	43	50	2	-	-	22
Hawaii	10	11	1	162	158	-	10	5	-
Guam	2	4	-	36	75	-	-	-	-
P.R.	291	469	-	102	241	-	2	-	36
V.I.	12	8	-	4	4	-	-	-	-
Amer. Samoa	-	-	-	12	7	-	1	-	-
C.N.M.I.	3	8	-	43	23	-	4	-	-

U: Unavailable

TABLE III. Deaths in 121 U.S. cities,* week ending November 3, 1990 (44th Week)

Reporting Area	All Causes, By Age (Years)						P&I**
	All Ages	≥65	45-64	25-44	1-24	<1	Total
NEW ENGLAND	608	420	104	51	16	17	45
Boston, Mass.	176	116	32	16	3	9	16
Bridgeport, Conn.	45	30	9	5	-	1	7
Cambridge, Mass.	23	19	4	-	-	-	1
Fall River, Mass.	20	16	1	2	-	1	-
Hartford, Conn.	54	28	13	8	4	1	1
Lowell, Mass.	18	14	2	1	1	-	-
Lynn, Mass.	16	15	-	1	-	-	-
New Bedford, Mass.	26	24	-	2	-	-	3
New Haven, Conn.	59	34	14	7	2	2	2
Providence, R.I.	36	27	6	1	1	1	2
Somerville, Mass.	10	5	4	1	-	-	3
Springfield, Mass.	50	34	10	2	3	1	4
Waterbury, Conn.	28	20	4	3	1	-	2
Worcester, Mass.	47	38	5	2	1	1	4
MID. ATLANTIC	2,569	1,679	478	278	80	54	131
Albany, N.Y.	51	41	7	2	-	1	7
Allentown, Pa.	17	13	2	2	-	-	1
Buffalo, N.Y.	112	83	19	5	3	2	4
Camden, N.J.	32	21	4	3	3	1	-
Elizabeth, N.J.	24	15	5	3	1	-	4
Erie, Pa.†	35	26	8	-	1	-	3
Jersey City, N.J.	56	35	8	9	1	3	4
N.Y. City, N.Y.	1,309	832	252	175	32	18	45
Newark, N.J.	60	25	12	13	1	9	4
Paterson, N.J.	27	14	7	4	-	2	2
Philadelphia, Pa.	401	245	85	42	16	13	33
Pittsburgh, Pa.†	66	42	9	1	12	2	2
Reading, Pa.	32	26	5	1	-	-	6
Rochester, N.Y.	121	91	21	5	3	1	6
Schenectady, N.Y.	38	30	4	3	1	-	-
Scranton, Pa.†	25	21	3	1	-	-	1
Syracuse, N.Y.	76	54	16	1	5	-	4
Trenton, N.J.	40	25	6	6	1	2	2
Utica, N.Y.§	19	16	2	1	-	-	1
Yonkers, N.Y.	28	24	3	1	-	-	2
E.N. CENTRAL	2,232	1,470	445	177	62	78	120
Akron, Ohio	50	38	9	3	-	-	1
Canton, Ohio	25	14	5	3	2	1	5
Chicago, Ill.§	564	362	125	45	10	22	16
Cincinnati, Ohio	123	77	28	7	3	8	11
Cleveland, Ohio	155	86	40	11	7	11	4
Columbus, Ohio	166	101	32	23	5	5	12
Dayton, Ohio	114	85	18	7	-	4	4
Detroit, Mich.	210	121	49	25	9	6	6
Evansville, Ind.	38	33	1	2	-	2	4
Fort Wayne, Ind.	54	39	10	1	4	-	6
Gary, Ind.	11	5	3	1	2	-	1
Grand Rapids, Mich.	60	49	6	3	1	1	3
Indianapolis, Ind.	176	111	39	12	8	6	8
Madison, Wis.	45	26	12	4	1	2	3
Milwaukee, Wis.	141	99	29	8	2	3	12
Peoria, Ill.	45	39	1	4	-	1	5
Rockford, Ill.	44	30	5	6	2	1	4
South Bend, Ind.	44	33	7	4	-	-	1
Toledo, Ohio	114	79	19	8	5	3	11
Youngstown, Ohio	53	43	7	-	1	2	3
W.N. CENTRAL	772	553	131	52	17	19	50
Des Moines, Iowa	76	53	15	4	2	2	3
Duluth, Minn.	30	27	3	-	-	-	2
Kansas City, Kans.	30	19	6	5	-	-	-
Kansas City, Mo.	103	72	20	9	2	-	5
Lincoln, Nebr.	27	19	5	2	-	1	2
Minneapolis, Minn.	176	131	29	10	2	4	16
Omaha, Nebr.	83	55	17	4	3	4	7
St. Louis, Mo.	134	92	17	12	5	8	7
St. Paul, Minn.	60	48	9	2	1	-	8
Wichita, Kans.	53	37	10	4	2	-	-

Reporting Area	All Causes, By Age (Years)						P&I**
	All Ages	≥65	45-64	25-44	1-24	<1	Total
S. ATLANTIC	1,433	833	315	163	67	54	59
Atlanta, Ga.	152	74	43	21	4	10	6
Baltimore, Md.	329	198	71	44	10	5	22
Charlotte, N.C.	87	48	15	4	18	2	-
Jacksonville, Fla.	107	66	19	14	4	4	7
Miami, Fla.	106	57	25	17	3	4	-
Norfolk, Va.	59	30	15	3	3	8	2
Richmond, Va.	82	49	18	8	6	1	4
Savannah, Ga.	32	21	5	4	-	2	3
St. Petersburg, Fla.	66	51	6	3	4	2	3
Tampa, Fla.	167	103	32	16	9	7	10
Washington, D.C.	209	104	62	28	6	9	2
Wilmington, Del.	37	32	4	1	-	-	-
E.S. CENTRAL	793	514	169	58	29	23	53
Birmingham, Ala.	125	69	30	12	9	5	2
Chattanooga, Tenn.	68	47	12	5	2	2	3
Knoxville, Tenn.	92	57	21	9	2	3	7
Louisville, Ky.	126	85	25	6	6	4	11
Memphis, Tenn.	184	120	36	15	7	6	14
Mobile, Ala.	66	44	16	2	2	2	5
Montgomery, Ala.§	36	26	8	2	-	-	4
Nashville, Tenn.	96	66	21	7	1	1	7
W.S. CENTRAL	1,668	1,009	378	176	61	44	60
Austin, Tex.	65	45	12	5	2	1	6
Baton Rouge, La.	20	10	3	3	3	1	-
Corpus Christi, Tex.	43	28	12	1	2	-	2
Dallas, Tex.	196	102	49	26	12	7	2
El Paso, Tex.	71	36	16	10	5	4	3
Fort Worth, Tex.	88	52	22	9	1	4	8
Houston, Tex.§	734	436	169	89	24	16	18
Little Rock, Ark.	77	53	15	3	4	2	5
New Orleans, La.	73	43	21	5	2	2	-
San Antonio, Tex.	171	115	36	11	6	3	7
Shreveport, La.	37	24	8	3	-	2	3
Tulsa, Okla.	93	65	15	11	-	2	6
MOUNTAIN	706	486	106	66	26	21	39
Albuquerque, N. Mex.	80	57	10	9	1	3	2
Colo. Springs, Colo.	31	21	8	1	-	1	4
Denver, Colo.	129	87	20	12	4	5	11
Las Vegas, Nev.	94	69	15	6	2	2	2
Ogden, Utah	27	24	1	1	-	1	2
Phoenix, Ariz.	169	105	25	19	15	5	2
Pueblo, Colo.	19	15	3	-	-	1	4
Salt Lake City, Utah	32	13	8	6	3	2	1
Tucson, Ariz.	125	95	16	12	1	1	11
PACIFIC	1,823	1,130	391	188	69	41	108
Berkeley, Calif.	20	14	4	1	-	1	-
Fresno, Calif.	64	41	16	2	4	1	3
Glendale, Calif.	25	23	1	1	-	-	3
Honolulu, Hawaii	85	51	21	8	3	2	-
Long Beach, Calif.	90	58	22	6	2	2	10
Los Angeles Calif.	412	222	94	57	25	12	12
Oakland, Calif.	53	36	8	4	3	2	4
Pasadena, Calif.	32	24	4	3	-	1	2
Portland, Oreg.	110	74	24	7	4	1	6
Sacramento, Calif.	173	107	34	18	12	2	12
San Diego, Calif.	188	119	41	14	10	4	20
San Francisco, Calif.	161	84	44	27	1	3	8
San Jose, Calif.	157	107	33	11	1	5	13
Seattle, Wash.	126	80	24	19	2	1	2
Spokane, Wash.	49	36	9	3	-	1	3
Tacoma, Wash.	78	54	12	7	2	3	10
TOTAL	12,604††	8,094	2,517	1,209	427	351	665

*Mortality data in this table are voluntarily reported from 121 cities in the United States, most of which have populations of 100,000 or more. A death is reported by the place of its occurrence and by the week that the death certificate was filed. Fetal deaths are not included.

**Pneumonia and influenza.

†Because of changes in reporting methods in these 3 Pennsylvania cities, these numbers are partial counts for the current week. Complete counts will be available in 4 to 6 weeks.

††Total includes unknown ages.

§Data not available. Figures are estimates based on average of past available 4 weeks.

Cigarette Sales – Continued

5. CDC. State laws restricting minors' access to tobacco. MMWR 1990;39:349–53.
6. Hearings Before the Senate Committee on Finance (May 24, 1990) (testimony of Louis W. Sullivan, MD, secretary of health).

Survey of Smoking-Prevention Education Efforts in Elementary Schools – Washington State, 1989

To achieve the Surgeon General's challenge of a smoke-free society by the year 2000 (*1*), the initiation of smoking must be prevented in school-aged children. In Washington state, recently enacted legislation will restrict smoking in elementary schools by fall 1991.* In addition, the Washington State Smoke-Free Class of 2000 Program† (SFC 2000), initiated in September 1988, endeavors to create a smoke-free generation beginning with high school students in the year 2000. This report summarizes a 1989 survey by the Washington Department of Health to assess the implementation of SFC 2000 in first-grade classrooms and to characterize smoking policies in elementary schools.

A principle strategy of SFC 2000 is to provide the state's public elementary schools with teaching materials for preventing smoking. The materials are organized into program packets that include activities (e.g., language and art), posters, certificates of recognition, student's pledge, and discussion questions. By January 5, 1989, 555 (53%) of the state's 1049 elementary schools had been provided the modules for use in kindergarten through sixth grade. In May 1989, questionnaires were mailed to a systematic sample of 345 (33%) of the 1049 schools. Nonrespondents received a follow-up mailing and were contacted by telephone. Forty-one schools were excluded because they did not have a first-grade class. Of the remaining 304 schools, 225 (74%) responded.

The questionnaire asked each school about 1) the school district's policy on smoking and smokeless tobacco use by teachers, staff, and students; 2) teachers' attitudes toward teaching smoking prevention; 3) use of SFC 2000 materials or other smoking-prevention teaching materials; and 4) teachers' opinions about the most helpful teaching materials.

Of the 225 schools, 59 (26%) prohibited faculty and staff from smoking in the buildings and on the grounds, and 27 (12%) prohibited smoking only in the buildings. However, 133 (59%) permitted faculty and staff to smoke in designated areas. Six (3%) schools did not respond to the question. Fifty-two (23%) schools were in districts that permitted high school students to smoke; 146 (65%) were in districts that prohibited student smoking in the buildings and on the school grounds; and 27 (12%) did not respond to the question. Forty-one (18%) had no policy regarding smokeless tobacco use.

In 119 (53%) schools, modules about smoking were presented three or more times during the year. In 121 (54%), a smoking-prevention curriculum was considered important.

One hundred twelve (50%) schools had received and were using SFC 2000 materials in first-grade classes. Sixty-seven (30%) schools had not received these

*RCW 28A.120.032.

†Sponsored by the American Cancer Society, Washington Division, Inc.; the American Heart Association, Washington Affiliate; and the American Lung Association of Washington.

Smoking-Prevention Education — Continued

materials but had implemented other approaches to teach first graders about nonsmoking. Thirty-six (16%) did not include a smoking-prevention program in the curriculum, and none of these had received the SFC 2000 materials. For 10 (4%) schools, the status of smoking-prevention efforts could not be determined.

All the elementary schools that had received SFC 2000 materials had incorporated them into their curricula. For the 36 schools that did not include a smoking-prevention module in their first-grade curriculum, the most commonly cited reasons were unavailability of appropriate instructional materials, lack of sufficient classroom time, and inadequate curriculum guidelines.

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Editorial Note: SFC 2000 is the collaborative response of the American Cancer Society (ACS), the American Heart Association (AHA), and the American Lung Association (ALA) to the Surgeon General's challenge to achieve a smoke-free society by the year 2000 (*1*). The four goals of SFC 2000 are to 1) provide the children of the class of 2000 and their parents and teachers with specifically designed antismoking education materials, 2) focus media and community attention on these children as the vanguard of a new "smoke-free" generation, 3) build and strengthen local coalitions of the three agencies, and 4) increase volunteer participation in coalition activities. Since 1988, more than 60,000 first-grade teachers nationwide have received material on SFC 2000 to integrate into their curricula.

In 1987, the National Adolescent Student Health Survey determined that, among eighth- and 10th-grade students, 11.0% of all boys and 8.5% of all girls had smoked a cigarette by the fourth grade (*2*). Because the inclusion of antismoking instruction in school health education curricula reduces initiation of smoking among children and adults (*3*), the need for early intervention within school health curricula is crucial. In 1988, the National School Boards Association (NSBA) reported that 75% of school districts had antismoking educational programs at the elementary school level (*4,5*). Of these schools, 74% received materials from volunteer health organizations (e.g., ACS, ALA, and AHA). NSBA also reported that 24% of school districts prohibited smoking by faculty, staff, and administrators and that 96% of schools with written policies on smoking addressed smoking by faculty, staff, and administrators. The findings in Washington were consistent with these national trends.

The National Cancer Institute advisory panel on smoking and school health recently recommended essential elements for school-based smoking-prevention programs (*6*). These elements include emphasizing the adverse or harmful social and short-term physiologic consequences of tobacco use; training students in refusal skills; involving parents, trained teachers, and peers in smoking-prevention activities; and designing a curriculum that reflects the needs of the community.

To provide local school districts with support for these programs, state health agencies and state superintendents of public instruction should emphasize smoking-prevention education and assist local school districts in obtaining appropriate and useful teaching modules.

Comprehensive teaching materials and supplemental smoking-prevention programs are available from the local ACS, ALA, and AHA offices. Information on the Washington SFC 2000 is available from the Program Director, SFC 2000, ACS, 2120 First Avenue North, P.O. Box 19140, Seattle, WA 98109-1140. Information on the

Smoking-Prevention Education — Continued

national SFC 2000 is available from the Program Director, SFC 2000, 20 North Wacker, Chicago, IL 60606; telephone (312) 346-4675.

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Erratum: Vol. 39, No. 43

The first line of the notice to readers about the Prevention 91 Conference (page 791) should begin: "On March 16–19, 1991 . . . ."

Reported cases of measles, by state — United States, weeks 40–44, 1990

The *Morbidity and Mortality Weekly Report* is prepared by the Centers for Disease Control, Atlanta, Georgia, and is available on a paid subscription basis from the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402, (202) 783-3238.

The data in this report are provisional, based on weekly reports to CDC by state health departments. The reporting week concludes at close of business on Friday; compiled data on a national basis are officially released to the public on the succeeding Friday. Accounts of interesting cases, outbreaks, environmental hazards, or other public health problems of current interest to health officials, as well as matters pertaining to editorial or other textual considerations should be addressed to: Editor, *Morbidity and Mortality Weekly Report*, Mailstop C-08, Centers for Disease Control, Atlanta, Georgia 30333; telephone (404) 332-4555.

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HHS Publication No. (CDC) 91-8017

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